Please type a plus sign (+) i his box the Paperwork Reduction Act of 1995, no persons are required to	:I.S. Patent and Trademark	for use through 10/31/2002. OMB 0651-00 Office: U.S. DEPARTMENT OF COMMERON OF COMMERON ON THE STATE OF COMMERON OF THE STATE OF T		
(8)	Application Number	09/916,529		
CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Filing Date	July 30, 2001 Kazuhiko Hayashi 2652 Klimowicz, William Joseph		
	First Named Inventor			
	Group Art Unit			
	Examiner Name			
	Attorney Docket Number	01FN046US		

Please change the Correto: Customer Nu	ımber	ass for the above-in 30743	dentified	appli	30743	Label he		
Firm <i>or</i> Individual Name				-	RE	CEIV	ED	
Address	APR 2 3 2003							
Address	Technology Center 2600							
City	State					ZIP		
Country								
Telephone			Fa	x				
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor. Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or Agent of record. Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number								
Typed or Printed Name Signature Date NOTE: Signatures of all the invent	$\frac{1}{2}$,		est or their	represe	entative(s) are n	eguired. Si	ubmit multiple	
forms if more than one signature is								

forms are submitted.

*Total of